

## **The Privacy Policy of HILLTOPS DENTISTRY consists of the following:**

- All information collected from the patient will be used for the purpose of providing treatment. Personal information such as name, address and health insurance details will be used for the purpose of addressing accounts to the patient, as well as processing payments and writing to the patient about any issues affecting their treatment.
- We may disclose a patient's health information to other health care professionals, or require it from them if, in our judgement, it is necessary in the context of the patient's treatment. In this event, disclosure of personal details will be minimised wherever possible.
- We may also use parts of a patient's health information for research purposes, in study groups or at seminars as this may provide benefit to other patients. Should that happen, a patient's personal identity would not be disclosed without their consent to do so.
- Patient history, treatment records, X-rays and any other material relevant to treatment will be kept and remain in a secure environment.
- Under the [privacy law](#), patients have rights of access to dental information held about them by this practice. We welcome a patient to inspect or request copies of their treatment records at any time, or seek an explanation from the dentist. The following procedure has been developed to ensure that all requests for access are dealt with as efficiently as possible:

-All requests for access (other than straightforward requests for copies of test or treatment results made to your dentist during your consultation) should be made in writing using (where available) a Request for Release of Dental Records Form.

-Requests for access will be acknowledged by the practice within **one week** of the receipt of the request.

-Where it is not possible for access to be granted within 30 days, the patient will be notified/advised when and if access will be granted.

-Where access is refused, the patient will be advised in writing of the reasons for refusal. This will include any information about other means by which access may be facilitated.

-A patient will not be permitted to remove any of the contents of their dental file from the practice, nor will they be permitted to alter or erase information contained in the dental record. However, if any of the information we have about a patient is inaccurate, a patient is encouraged to ask us to alter their records accordingly, in writing.

-When a request for copies of dental records is received, a fee may be required to be paid by the patient.

-Generally, records will be transferred by the practice (on behalf of consenting patients) from one treating practitioner to another. In limited circumstances patients will be required to collect their records in person or may request in writing that records are provided to another authorised person.

-If a patient, or authorised person, is collecting a copy of dental records, they may be required to provide identification. Where possible this should be photographic identification.

### **A COPY OF THIS POLICY IS AVAILABLE:**

1. ONLINE at [www.hilltopsdentistry.com](http://www.hilltopsdentistry.com)
2. ON DISPLAY IN THE PRACTICE
3. AT RECEPTION, in NEW PATIENT PROCESS